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**APPLICANTS**  
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**CONTINUING DATA** .....  
*none*

**FOREIGN APPLICATIONS** .....  
 JAPAN 2002-316942 10/31/2002  
*ok*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>cc</i>		

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**TITLE**  
 Artificial root of a tooth

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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